# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE/	MS MRS / MR FIRST	МІ	OFFICE USE ONLY		
OFFICEHOLDER NAME	Linda	L	Date Beceived		
,	NICKNAME LAST	SUFFIX	REC		
	Harve		OCT 11 2016		
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP CODE	-		
MAILING ADDRESS	1103 Anderson Sui	te102	Q @4:20pm		
Change of Address	College Station	TX 77840	7.20pm		
5 CANDIDATE/	AREA CODE PHONE NUMBER	EXTENSION			
OFFICEHOLDER PHONE	(979) 703 - 630	05	Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER	MS/MRS/MRS /MRS BEA	MI	Receipt # Amount \$		
NAME		SUFFIX	Date Processed		
	NICKNAME LAST White	SULLY	Date Imaged		
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT /	SUITE #; CITY; STATE;	ZIP CODE		
TREASURER ADDRESS	in a lt 1.	0. 00	It. TX		
(Residence or Business)	4759 Standin	(er. Olley	Alallon "		
		0	77845		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (979) 219-239	EXTENSION			
9 REPORT TYPE	January 15 30th day before	e election Runoll	15th day after campaign treasurer appointment		
	July 15 8th day before 6	election Exceeded \$500 limit	(Officeholder Only) Final Report (Allach C/OH - FR)		
	United Section	olocion			
10 PERIOD	Month Day Year	Month	Day Year		
COVERED	7/28/2016	THROUGH 10	11 / 2016		
11 ELECTION	ELECTION DATE	ELECTION TYPE			
	Month Day Year Primar	y Runoff Other Description			
	Genera	al Special			
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if know	n)		
		Collage 5 Place 3	tation City Council		
GO TO PAGE 2					

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

#### FORM C/OH COVER SHEET PG 2

14 C/OH NAME	L. Harve	//	15 Filer ID (Ethics Commission Filers)		
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL		-		
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
Additional Pages					
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS		OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER TH. S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ	AN \$ 944.45		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 944.45 \$ 5,394.45		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 323.64		
	4. TOTAL	\$ 3,194.15			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD		\$ 3,194.15 . DAY \$ 2,200.30		
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T Y OF THE REPORTING PERIOD	THE \$		
18 AFFIDAVIT					
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.  Notary Public, State of Texas' My Commission Expires June 20, 2017  Signature of Candidate or Officeholder					
AFFIX NOTARY STAMP/SEALABOVE					
Sworn to and subscribed before me, by the said Linda L. Harvell, this the					
day of October, 2016, to certify which, witness my hand and seal of office.					
Quilter Ian Whittenton Records Administrate					
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					

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#### SUBTOTALS - C/OH

# FORM C/OH COVER SHEET PG 3

19	FILER NAME Linda L. Harvell	20 Filer ID (Ethics Con	mmission Filers)
	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ N, 450.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL COI	NTRIBUTIONS	\$
з.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ _
4.	SCHEDULE E: LOANS		\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM	POLITICAL CONTRIBUTIONS	\$ 1,748.24
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FR	OM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	)	\$ 1,122,27
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM	PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTR	RIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FRO	M POLITICAL CONTRIBUTIONS	\$ <b>-</b>
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, A RETURNED TO FILER	ND CONTRIBUTIONS	\$ ,

## MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Linda L Harvell 4 Date ) 7 Amount of contribution (\$) 8/31/16 G Contributor address; City; State; Zip Code TX 47.59 Stanzbrian College Station 77845 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) Contributor address; City; State; Zip Code 3943 13/ve Jay CT College STITION TX 77845 ation / Job title (See Instructions) Employer (See Instructions) \$ 100.00 Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) Sherry Ellison Contributor address; City; State; Zip Code 2705 Brook way Dr. College Station TX 77845 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$ 100.00 9/7/16 Contributor address; City; State; Zip Code 313 Perghing Cellege Station TX 77840 Principal occupation / Job title (See Instructions) Employer (See Instru Amount of contribution (\$) 9 200,00 ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Linda L. Harvell 1 Date 5 Full name of contributor out-of-state PAC (ID#: ) 7 A Margaret Gedtrey 9/13/16 6 Contributor address; City; State; Zip Code 1905 Springhaven Classe Tation TX 77846 3 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 7 Amount of contribution (\$) \$100.00 Full name of contributor Date Out-of-state PAC (ID#: Amount of contribution (\$) \$100.00 Principal occupation / Job title (See Instruction Full name of contributor Date out-of-state PAC (ID#: Amount of contribution (\$) 9/18/16 Contributor address; City; State; Zip Code 18/1 Shewarwood College Station TX 77940 \$ 100.00 Principal occupation / Job title (See Instruction Date Out-of-state PAC (ID#: Amount of contribution (\$) Principal occupation / Job title (See Instructions) Cabula Cabula Cabula Contributor address; City; State; Zip Code 2205 Hillside Du College Station TX 7704 Employer (See Instructions) Bryan TX 7702 Employer (See Instructions) \$250.00 ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Linda L. Harvell 7 Amount of contribution (\$) 9/26/16 6 Contributor address; City; State; Zip Code 112/1 Katy Freeway #325 Houston TX 77074 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) \$1,000.00 Full name of contributor out-of-state PAC (ID#: 9/28/16 Contributor address; City; State; Zip Code 203 Cezilia CT College Station TX 77845 Employer (See Instru Amount of contribution (\$) \$100.00 Principal occupation / Job title (See Instr Employer (See Instructions) Date Out-of-state PAC (ID#: Amount of contribution (\$) 9/29/16 Contributor address; City; State; Zip Code 835 N. Rose many Dr Bryan TX 77902 Principal occupation / Job title (See Instructions) Employer \$100.00 Employer (See Instructions) Date Out-of-state PAC (ID#: Amount of contribution (\$) Principal occupation / Job title (See Instructions) Holks Tvish City; State; Zip Code 1004 Ash bovn Ave Lallege Station TX 77840 Employer (See Instru \$150.00 Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Linda L Harvell 4 Date | 5 Full name or continuous | Aynn McIlhancy | 9/16/16 | 6 Contributor address; City; State; Zip Code | 2022 Oakward Trail | Cillege Station TX 77845 | State out-of-state PAC (ID#: 7 Amount of contribution (\$) \$25000 Full name of contributor out-of-state PAC (ID#:\_\_\_\_ Amount of contribution (\$) David Marion Contributor address; City; State; Zip Code 10276 N Dowling Rd College Station TX 77845 Employer (See Instructions) \$ 100,00 Principal occupation / Job title Out-of-state PAC (ID#: Amount of contribution (\$) 9/22/16 Contributor address; City; State; Zip Code 2112 Maple wood CT College Station TX 77845 Principal occupation / Job title (See Instructions) Employer \$ 10000 Out-of-state PAC (ID#: Amount of contribution (\$) 9/24/16 Blanche Brick Contributor address; City; State; Zip Code 1309 Fox five Pr College Station TX 77845 Principal occupation / Job title/See Instructions) Employer (See Instructions) \$100.00 ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Linda Harvell 4 Date 7 Amount of contribution (\$) 10/3/16 The mas Aughinbaugh III 6 Contributor address; City; State; Zip Code 10-36 Rese Circle College Station TX 77940 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) \$100,00 Full name of contribution. 8/29/16 Contributor address; City; State; Zip Code \$257 Sacge Brosh College Station TX 77845 Employer (See Instructions) Date out-of-state PAC (ID#:\_\_\_\_ Amount of contribution (\$) \$100.00 Full name of contributor Date Out-of-state PAC (ID#: Amount of contribution (\$) Shirley Ford Shirley Ford Contributor address; City; State; Zip Code POBox 1319 Frankly TX 77856 Principal occupation / Job title (See Instructions) Employee \$100.00 Employer (See Instructions) Date out-of-state PAC (ID#: Amount of contribution (\$) Cheryl Rulkowski Contributor address; City; State; Zip Code 14407 CR 336 Coldwell TX 77836 Pation Line title (See Instructions) Employe \$ 100.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Linda L Harvell Date 5 Full name of contributor out-of-state PAC (IDII: ) 7 A Mark Middle brooks 9/5/16 6 Contributor address; City; State; Zip Code 5.308 St Andrews Dr College Station TX 77845 Scinalizal occupation / Job title (See Instructions) 9 Employer (See Instructions) 7 Amount of contribution (\$) \$ 250,00 Full name of contributor Date Out-of-state PAC (ID#:\_\_\_ Carrie Hurt Contributor address; City; State; Zip Code 2223 Parkland Cove Round Rock TX 78681 The title (See Instructions) Employer (See Instructions) Amount of contribution (\$) \$ 10000 Principal occupation / Job title (See Instru Amount of contribution (\$) 9/19/16 Contributor address; City; State; Zip Code \$ 100.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Amount of contribution (\$) Cavolyn Allen Contributor address; City; State; Zip Code 2628 Peach Cverk College Station TX 77845 Principal occupation / Job title (See Instructions) Employer (S \$ 200,00 Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONE	TARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME	Linda h. Harvell	3 Filer ID (Ethics Commission Filers)
4 Date 9/23/16	5 Full name of contributor out-of-state PAC (ID#: )  Nancy   ng   ig  6 Contributor address; City; State; Zip Code  3412 Lienz La	7 Amount of contribution (\$)
8 Principal occu	ipation / Job title (See Instructions)  9 Employer (See Instructions)	tions)
Date	Full name of contributor	Amount of contribution (\$)
9/26/16	Many Duesser.  Contributor address: City; State; Zip Code  501 Fairview  College Station TX 77840	\$ 100.00
Principal occup	pation / Job title (See Instructions)  Employer (See Instructions)	ions)
Date	Full name of contributor out-of-state PAC (ID#: )	Amount of contribution (\$)
9/29/16	Contributor address; City; State; Zip Code	\$ 150.00
Principal occup	pation / Job title (See Instructions) Employer (See Instructions)	ions)
Date	Full name of contributor out-of-state PAC (ID#: )	Amount of contribution (\$)
10/9/16	Contributor address; City; State; Zip Code	\$100.00
Principal occup	Dation / Job title (See Instructions)  Employer (See Instructions)	ions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEI If contributor is out-of-state PAC, please see instruction guide for additional re	EDED reporting requirements.

## POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Travel In District Contributions/Donations Made By Travel Out Of District Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Legal Services Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME Linda L. Harvell 5 Payee name The Insite Crosp 7 Payee address; City; State; Zip Code 123 F. W.J. Bryan Phwy Bryan TX 77803 (a) Category (See Categories listed at the top of this schedule) (b) Des \$1,748.24 (b) Description \_\_\_ Check if travel outside of Texas. Complete Schedule T. Advertising Check if Austin, TX, officeholder living expense **EXPENDITURE** Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Date Amount (\$) Payee address; City; State; Zip Code Category (See Categories listed at the top of this schedule) Description .... Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF Check if Austin, TX, officeholder living expense **EXPENDITURE** Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name Amount (\$) Payee address; City; State; Zip Code

PURPOSE

**EXPENDITURE** 

Complete ONLY if direct expenditure to benefit C/OH

Category (See Categories listed at the top of this schedule)

Candidate / Officeholder name

Office held

Check if travel outside of Texas. Complete Schedule T.

Check if Austin, TX, officeholder living expense

Office sought

#### **EXPENDITURES MADE BY CREDIT CARD**

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Event Expense Food/Beverage Expense Glft/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Travel In District Travel Out Of District Printing Expense Salaries/Wages/Contract Labor Other (enter a category not listed above) Candidate/Officeholder/Political Committee The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME 1 Total pages Schedule F4: Linda L Harvell 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 6 Payee name Fed Ex Office

8 Payee address; City; State; Zip Code

509 University Dr.

College Station, TX 77840 9/18/16 \$552.27 EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description 10 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Advertising Check if Austin, TX, officeholder fiving expense Office held Office sought Candidate / Officeholder name 11 Complete ONLY if direct expenditure to benefit C/OH Payee name

Bryan Broadcasting

Payee address; City; State; Zip Code

PO Box 3248 9/30/16 Amount (\$) Bryan TX 77805 \$570.00 TYPE OF Political EXPENDITURE Description Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Check if Austin, TX, officeholder living expense OF EXPENDITURE Advortising Office held Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought